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7780 Office Plaza Drive S. Suite 184 West Des Moines, IA 50266-2337 Phone: 515.223.0159 Fax: 515.223.5429 www.kiesling.com

Received & Inspected

NCT 2 4 2013

FCC Mail Room

October 11, 2013

Office of the Secretary Federal Communications Commission 9300 East Hampton Drive Capitol Heights, MD 20743

RE:

In the Matter of Connect America Fund, A National Broadband Plan for Our Future, Establishing Just and Reasonable Rates for Local Exchange Carriers, High-Cost Universal Service Support, Developing a Unified Intercarrier Compensation Regime, Federal-State Joint Board on Universal Service, Lifeline and Link-Up, Universal Service Reform – Mobility Fund, WC Docket No. 10-90, GN Docket No. 09-51, WC Docket No. 07-135, WC Docket No. 05-337, CC Docket No. 01-92, CC Docket No. 96-45, WC Docket No. 03-109, WT Docket No. 10-208, Order, 27 FCC Rcd 605 (2012).

With this letter we file **Webster-Calhoun Cooperative Telephone Association (SAC 359132)** FCC Form 481, which is due to the Commission on or before October 15, 2013.

This filing has already been submitted with USAC and an electronic filing has been made with the relevant state regulatory agency.

Please call me at 515-223-0159 if you have any questions concerning this filing.

KIESLING ASSOCIATES LLP

Robert I. Umsted, CPA

Regulatory Consultant/Senior Manager

Enclosures

cc: Marcie Boerner, Webster-Calhoun Cooperative Telephone Association

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	rm 481 - Carrier Annual Reporting blection Form	FCC Formass CAMB Control No. 34 Adv. 2013	500 5085/OMB Control No. 3060-0819
<010>	Study Area Code	359132	
<015>	Study Area Name	Webster-Calhoun Cooperative Telephone Association	ecte
<020>	Program Year	2014	11/24 013
<030>	Contact Name: Person USAC should contact with questions about this data	Daryl Calson	No. Jako
<035>	Contact Telephone Number: Number of the person identified in data line <030	515-352-3151	Se O. Mail
<039>	Contact Email Address: Email of the person identified in data line <030>	Darylc@wccta.com	Proposition of the state of the
ANNUA	L REPORTING FOR ALL CARRIERS		SA.313 S4.422 Completion Completion Required Required (check box when complete)
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	(check box when complete)
<200> <210>	Outage Reporting (voice)	(complete attached worksheet) f no outages to report	1
<310>	Unfulfilled Service Requests (voice) Detail on Attempts (voice) Unfulfilled Service Requests (broadband) Detail on Attempts (broadband)	(attach descriptive document) (attach descriptive document)	<u> </u>
<400> <410> <420> <430> <440> <450>	Number of Complaints per 1,000 customers (voice Fixed Mobile 0.0 Number of Complaints per 1,000 customers (broad Fixed Mobile		
<900> <1000> <1010> <1100> <1110>	Service Quality Standards & Consumer Protection 3591321a510 Functionality in Emergency Situations 3591321a610 Company Price Offerings (voice) Company Price Offerings (broadband) Operating Companies and Affiliates Tribal Land Offerings (Y/N)? Voice Services Rate Comparability Terrestrial Backhaul (Y/N)? Terms and Condition for Lifeline Customers	(check to indicate certification) (attached descriptive document) (check to indicate certification) (attached descriptive document) (complete attached worksheet) (complete attached worksheet) (complete attached worksheet) (if yes, complete attached worksheet) (check to indicate certification) (attach descriptive document) (if not, check to indicate certification) (complete attached worksheet) (complete attached worksheet)	
<2000> <2005> <3000> <3005>	Price Cap Carriers, Proceed to <u>Price Cap Addition</u> Including Rate-of-Return Carriers affiliated with Price Cap Addition Rate of Return Carriers, Proceed to <u>ROR Addition</u>	rice Cap Local Exchange Carriers (check to indicate certification) (complete attached worksheet)	
		,	1 26. 106. 106. 106. 106. 106.

	ervice Quality improvement Reporting ellection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	
<015>	Study Area Name Webster-Calho	un Cooperative Telephone Association
<020>	Program Year 2014	
<030>	Contact Name - Person USAC should contact regarding this data Dary1	Calson
<035>	Contact Telephone Number - Number of person identified in data line <030> 515-	352-3151
<039>	Contact Email Address - Email Address of person identified in data line <030> par	ylc@wccta.com
<110>	Has your company received its ETC certification from the FCC?	(yes / no) O
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no) O O
	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.	
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your composite which only receives frozen support, your progress report is only required to address voice telephony service.	pany is a
	Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	Name of Attached Document (.pdf)
<113>	Maps detailing progress towards meeting plan targets	
<114>	Report how much universal service (USF) support was received	
<115>	How (USF) was used to improve service quality	
<116>	How (USF)was used to improve service coverage	
<117>	How (USF) was used to improve service capacity	
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	

July 2013	(200) Service Outage Reporting (Voice Data Collection Form	e)	Companies of the	CANAL CO.	7 (2) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	FCC Form 481 OMB Control No. 3060-09	86/OMB Control No. 3060-0819
	Data Collection Form			California de la companya del companya del companya de la companya			SO/ONIS CONTO NO. 3000-0613

<010>	Study Area Code	359132				
<015>	Study Area Name	Webster-Calhoun Cooperative Telephone Association				
<020>	Program Year	2014				
<030>	Contact Name - Person USAC should contact regarding this data Daryl Calson					
<035>	Contact Telephone Number - Number of person identified in data line <030> 515-352-3151					
<039>	Contact Email Address - Email Address of person identified in data line <030> Darylc@wccta.com					

<220>

<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
NORS									Did This Outage		
Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
Number	Date	Time	Date	Time	Customers Affected	Total Number of	Affected	Description (Check	Study Areas	Service Outage	Preventative
						Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
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	ce Offerings Including Voice Rate Data lection Form	FCC Form 481 OMB Control No. 3060-0986/OM8 Control No. 3060-0819 July 2013
<010>	Study Area Code	359132
<015>	Study Area Name	Webster-Calhoun Cooperative Telephone Association
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Daryl Calson
<035>	Contact Telephone Number - Number of person identified in data line <030>	515-352-3151
<039>	Contact Email Address - Email Address of person identified in data line <030>	Darylc@wccta.com
<701> <702>	Residential Local Service Charge Effective Date 1/1/2013 Single State-wide Residential Local Service Charge	

<ai>></ai>	<92>	<#3>	<612×	4t2>	<63>	 44×	<65>	\$65
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
State	Exercing (1220)	SACTO-101	nate type	Service Hate	State Seponder Enio State	5,010 0111011501101011001100	service analyse	Total per mile nates and 10
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(710) Broadband Price Offerings Data Collection Form July 2013
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<010>	Study Area Code	359132				
<015>	Study Area Name	Webster-Calhoun Cooperative Telephone Association				
<020>	Program Year	2014				
<030>	Contact Name - Person USAC should contact regarding this data	Daryl Calson				
<035>	> Contact Telephone Number - Number of person identified in data line <030> 515-352-3151					
<039>	Contact Email Address - Email Address of person identified in data line <030> Darylc@wccta.com					

<711>	<a1></a1>	۹>	41 2	462 >	40	<d1></d1>	<62>	<d3></d3>	<64> ```
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (<i>select</i>)
			Se	e attached					
				sheet					
						<u> </u>			<u> </u>
			<u></u>					·	
			-					 ,	

	(800) Operating Companies Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code		359132
<015>	Study Area Name		Webster-Calhoun Cooperative Telephone Association
<020>	Program Year		2014
<030>	Contact Name - Person	USAC should contact regarding this data	Daryl Calson
_<035>	Contact Telephone Num	nber - Number of person identified in data line <03	0> 515-352-3151
<039>	Contact Email Address -	Email Address of person identified in data line <03	30> Darylc@wccta.com
<810>	Reporting Carrier	Webster - Calhoun Cooperative Telephone	Assocation
<811>	Holding Company	Webster - Calhoun Cooperative Telephone	Assocation
<812>	Operating Company	Webster - Calhoun Cooperative Telephone	Assocation

<813>	cally in the second of the sec	: <8 2>	<83>
	Affiliates	SAC	Doing Business As Company or Brand Designation
		ttached works	had
	See a	ttached works	neet
		<u> </u>	

	pal Lands Reporting	FCC Form 481
Data Coll	ection Form	OMB Control No3060-0986/OMB Control No3060-0819 July 2013
		1001, 10020
<010>	Study Area Code	359132
<015>	Study Area Name	Webster-Calhoun Cooperative Telephone Association
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Daryl Calson
<035>	Contact Telephone Number - Number of person identified in data line	
<039>	Contact Email Address - Email Address of person identified in data line	<030> Darylc@wccta.com
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	
.520		Name of Attached Document (.pdf)
	If your company serves Tribal lands, please select (Yes, No, NA) for	
	each these boxes to confirm the status described on the attached	
	PDF, on line 920, demonstrates coordination with the Tribal	
	government pursuant to § 54.313(a)(9) includes:	
	(-),-,	Colon
		Select (Yes,No,
		NA)
<921>	Needs assessment and deployment planning with a focus on Tribal	
(321)	community anchor institutions;	
<922>	Feasibility and sustainability planning;	R. W. W. W. R.
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	
-525	compliance I man partition and program Loden attends.	

	Terrestrial Backhaul Reporting ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	359132
<015>	Study Area Name	Webster-Calhoun Cooperative Telephone Association
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Daryl Calson
<035>	Contact Telephone Number - Number of person identified in data line <030>	515-352-3151
<039>	Contact Email Address - Email Address of person identified in data line <030>	Darylc@wccta.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

10/09/2013 Page 8

Lifeline	rms and Condition for Lifeline Customers ection Form	FCC Form 481 OMB Control No. 3060-0886/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	359132
<015>	Study Area Name	Webster-Calhoun Cooperative Telephone Association
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Daryl Calson
<035>	Contact Telephone Number - Number of person identified in data li	ine <030> 515-352-3151
<039>	Contact Email Address - Email Address of person identified in data I	line <030> Darylc@wccta.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Name of attached document (.pdf)
<1220>	Link to Public Website	HTTPhttps://www.iwireless.com/customer_support-lifeline.asp
	"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	Additional charges for toll calls, and rates for each such plan.	

10/09/2013 Page 9

	ice Cap Carrier Additional Documentation.		FCC Form AR1 OMB Control No. 3060-0986/OMB Control No. 3060-0819
	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		July 2013
<010>	Study Area Code 35913		
<015>	Study Area Name Webst	er-Calhoun Cooperative Telephone Association	
<020>	Program Year 2014		
<030>	Contact Name - Person USAC should contact regarding this data Dary1	Calson	
<035>	Contact Telephone Number - Number of person identified in data line <030> 51	5-352-3151	
<039>	Contact Email Address - Email Address of person identified in data line <030> Details a contact Email Address - Email Address of person identified in data line <030>	rylc@wccta.com	
CHECK th	ne boxes below to note compliance as a recipient of Incremental Connect America F	hase I support, frozen High Cost support. High Cost support to offset a	access charge reductions, and Connect America Phase II
		e information reported on this form and in the documents attached b	
		·	
	Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification {47 CFR § 54.313(b)(1)}		
<2011>	3rd Year Certification {47 CFR § 54.313(b)(2)}		
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))		
<2012>	2013 Frozen Support Certification		
<2013>	2014 Frozen Support Certification		
<2014>	2015 Frozen Support Certification		
<2015>	2016 and future Frozen Support Certification		
	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}		
<2016>	Certification Support Used to Build Broadband		
	Connect America Phase II Reporting (47 CFR § 54.313(e))		
<2017>	3rd year Broadband Service Certification		
<2018>	5th year Broadband Service Certification		\square
<2019>	Interim Progress Certification		
<2020>	Please check the box to confirm that the attached PDF, on line 2021,		
	contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipi	ent	
	of CAF Phase II support shall provide the number, names, and addresses of		
	community anchor institutions to which began providing access to broadba	nd	
	service in the preceding calendar year.	•••	
<2021>	Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information	
=	•	· · · · · · · · · · · · · · · · · · ·	

(3000) Ra	te Of Return Carrier Additional Documentation		FCCForm AB1
Data Coli	ection Form		OMB Control No. 3960-0986/OMB Control No. 3060-0819
			July 2013
NAME OF THE OWNER			
010>	Study Assa Cada 359132		
<010>	Study Area Code Study Area Name Webster-	Calhoun Cooperative Telephone Association	
<020>	Program Year 2014		
<030>		cyl Calson	
<035>	Contact Telephone Number - Number of person identified in data line <030>	515-352-3151	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Darylc@wccta.com	
CHECK t	he boxes below to note compliance on its five year service quality plan (pursu	ant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring	compliance with the financial reporting requirements set forth in 47
		the information reported on this form and in the documents attach	
	Annual Company		
	Progress Report on 5 Year Plan		
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i))	Name of Attached Document Listing Required Information	
	Please check this box to confirm that the attached PDF, on line 3012,		
	contains the required information pursuant to § 54.313 (f)(1)(ii), as a		
(3011)	recipient of CAF Phase II support shall provide the number, names, and		
	addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.		
	access to proaupanu service in the preceding calendar year.		
(3012)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))		(Yes/No)
(3014)	If yes, does your company file the RUS annual report		(Yes/No)
	Please check these boxes to confirm that the attached PDF, on line 3017,		_
	contains the required information pursuant to § 54.313(f)(2) compliance		
	requires: Electronic copy of their annual RUS reports (Operating Report for		
(3015)	Telecommunications Borrowers)		
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(,	•		
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	
(3018)	If the response is no on line 3014, is your company audited?	Marie of Attached Document Listing Required information	(Yes/No)
	If the response is yes on line 3018, please check the boxes below to		(1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
	confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains		
	:		
(3019)	Either a copy of their audited financial statement; or (2) a financial report		
(3013)	in a format comparable to RUS Operating Report for Telecommunications		
(3020)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
	Name and the second bush is demandant and the self-		
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.		
	If the response is no on line 3018, please check the boxes below		
	to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:		
	Copy of their financial statement which has been subject to review by an		
(3022)	independent certified public accountant; or 2) a financial report in a		
(3022)	format comparable to RUS Operating Report for Telecommunications		
	Borrowers,		
(3023)	Underlying information subjected to a review by an independent certified public accountant		
(3024)	Underlying information subjected to an officer certification.		
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
			
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

	Son - Reporting Carri ection Form	ECC FORM 481 DAMB Control No. \$060-0986/00M8 Control No. \$060-0819 July 2013
<010>	Study Area Code	359132
<015>	Study Area Name	Webster-Calhoun Cooperative Telephone Association
<020>	Program Year	2014
<030>	Contact Name - Perso	on USAC should contact regarding this data Daryl Calson
<035>	Contact Telephone No	umber - Number of person identified in data line <030> 515-352-3151
<039>	Contact Email Addres	s - Email Address of person identified in data line <030> Darylc@wccta.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.			
Name of Reporting Carrier:			
Signature of Authorized Officer:		Date	
rinted name of Authorized Officer:	<u> </u>		
itle or position of Authorized Officer:			
Telephone number of Authorized Officer:			
Study Area Code of Reporting Carrier:	Filing Due Date for this form:		

Deta Col	Bon - Agent / Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0919 fully 2013
<010>	Study Area Code	359132
<015>	Study Area Name	Webster-Calhoun Cooperative Telephone Association
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<030>	Contact Name - Person USAC s	nould contact regarding this data Daryl Calson
<035>	Contact Telephone Number - N	umber of person identified in data line <030> 515-352-3151
<039>	Contact Email Address - Email A	ddress of person identified in data line <030> Darylc@wccta.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

certify that (Name of Agent) <u>Daryl_Carlson</u> also certify that I am an officer of the reporting carrier; my responsibil agent; and, to the best of my knowledge, the reports and data provide	lities include ensuring the accuracy of the annual data reporting	reported on behalf of the reporting carrier. g requirements provided to the authorized
Name of Authorized Agent: Daryl Carlson		
Name of Reporting Carrier: Webster-Calhoun Cooperative Tel	ephone Association	
Signature of Authorized Officer: CERTIFIED ONLINE		Date: 10/09/2013
Printed name of Authorized Officer: Daryl Carlson		
Fitle or position of Authorized Officer: EVP, General Manager		
Telephone number of Authorized Officer: 515-352-3151		
Study Area Code of Reporting Carrier: 359132	Filing Due Date for this form: 10/15/2013	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier				
i, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.				
ame of Reporting Carrier: Webster-Calhoun Coop	erative Telephone Association			
ame of Authorized Agent or Employee of Agent: Kiesling	Associates LLP			
gnature of Authorized Agent or Employee of Agent: CERTIFIE	D ONLINE		Date: 10/09/2013	
inted name of Authorized Agent or Employee of Agent: Kiesli	ng Associates LLP			
tle or position of Authorized Agent or Employee of Agent Regul	atory Comsultant			
elephone number of Authorized Agent or Employee of Agent: 515	-223-0159			
	Filing Due Date for this form:	10/15/2013		

Attachments

	Character strategies (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	ACTION AND AND AND AND AND AND AND AND AND AN	Charles and the Control of the Contr
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(800) Operating Companies			Form 481
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Data Collection Form		Company of the compan	IB Control No. 3060-0986/OMB Control No. 3060-0819
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<015>	Study Area Name	Webster-Calhoun Cooperative Telephone Association			
<020>	Program Year	2014			
<030>	Contact Name - Person U	SAC should contact regarding this data Daryl Calson			
<035>	Contact Telephone Numb	per - Number of person identified in data line <030> 515-352-3151			
<039>	39> Contact Email Address - Email Address of person identified in data line <030> Darylc@wccta.com				
<810>	Reporting Carrier	Webster - Calhoun Cooperative Telephone Assocation			
<811>	Holding Company	Webster - Calhoun Cooperative Telephone Assocation			
<812>	Operating Company	Webster - Calhoun Cooperative Telephone Assocation			

<42>	- ca55
SAC	Doing Business As Company or Brand Designation
351328	
359131	
359016	
351106	
359072	
L	
	351328 359131 359016 351106

FCC Form 481, Line 510: Certification of Compliance with Applicable Service Quality Standards and Consumer Protection Rules

Iowa Administrative Code §199-22.6 requires an ETC to certify in its annual report that it is complying with applicable service quality standards and consumer protection rules. The ETC will measure its service connection, held order, and service interruption performance monthly according to this section. Webster – Calhoun Cooperative Telephone Association certifies that it has complied with these requirements and will continue to comply with these requirements.

FCC Form 481, Line 610: Certification Regarding Ability to Function in Emergency Situations

Iowa Administrative Code §199-22.6(5) requires an ETC to certify in its annual report that it is complying with provisions to meet emergencies including but not limited to the provision of emergency power. Each central office shall contain a minimum of two hours of battery reserve and for offices without permanently installed emergency power facilities, there shall be access to a mobile power unit with enough capacity to carry the load which can be delivered on reasonably short notice and readily connected. Webster — Calhoun Cooperative Telephone Association certifies that it has complied with these requirements and will continue to comply with these requirements.